## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

03500.017361

CLAIMS AS FILED - PART I (Column 1)						mn 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			92				F	ATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			22 minus 20=		* 2		×	(\$ 9=		OR	X\$18=	36
INDEPENDENT CLAIMS			y minus 3 =		*		\ \rac{1}{2}	(42=		OR	X84=	84
MULTIPLE DEPENDENT CLAIM PRESENT							+	140=		OR	+280=	17
* If the difference in column 1 is less than zero, en					nter "0" in column 2			OTAL		OR	TOTAL	870
CLAIMS AS AMENDED - PART II											OTHER	THAN
(Column 1)			(Colum					SMALL ENTITY		OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	F CL ASSA	]=	>	(42=		OR	X84=	
<u> </u>	FIRST PRESE	NIATION OF MI	JETIPLE DEF	PENDEN	CLAIIVI		+	140=		OR	+280=	
	,						400	TOTAL IT. FEE		OR	TOTAL ADDIT, FEE	
	(Column 1) (Column 2) (Column 3)							11. 1 22		•	ADDII. I EE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	×	\$ 9=		OR	X\$18≃	
	Independent	* NTATION OF MI	Minus	***	CLAIM	=	^	(42=		OR	X84=	
<u> </u>	THOTTALOL	INTATION OF WIL	JETTP LL DET	LINDLIN	CLAIIVI		+	140=		OR	+280=	
							ADD	TOTAL IT. FEE		OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	×	\$ 9=		OR	X\$18=	
WE	Independent	*	Minus	***		=	×	42=			X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDEN				T CLAIM					OR		
*	If the entry in activ	mn 1 in loss that t	no ontre in ont	ıma O	¬ "O" :¬	duma 2	+	140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												